## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Democratic Party of Oregon Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bonamici, Suzanne, M., , Date of Receipt Mailing Address 2236 SE 10th Ave 2021 City Zip Code State Transaction ID: 11ai-000182683 OR Portland 97214 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **US House** Representative Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Harris, Rachel, , , Date of Receipt Mailing Address 11305 SW 47th 2021 City State Zip Code Transaction ID: 11ai-000182690 OR Portland 97219 Amount of Each Receipt this Period FEC ID number of contributing 36.34 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 216.34 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Schumann, John, , , Date of Receipt Mailing Address 3025 NE 34th Avenue 06 2021 City State Zip Code Transaction ID: 11ai-000182691 OR Portland 97212 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1086.34 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....